

VIA FACSIMILE NO.: (703) 305-7687

PATENT
TOP01 P-100

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application Serial No. : 10/064,416
Applicants : Thomas G. Topolski
Filing Date : July 11, 2002
Art Unit : 3712
Examiner : Kurt Fernstrom
For : SWIM STROKE TRAINER
Attorney Docket No. : TOP01 P-100
Customer No. : 28101

Confirmation No.: 9321

RECEIVED
CENTRAL FAX CENTER

OCT 02 2003

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

OFFICIAL

Dear Sir:

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following papers are being facsimile transmitted to the Patent and Trademark Office on the date shown below:

1. RESPONSE (9 pages)
2. CLAIMS AS AMENDED FORM (1 page)

YOU SHOULD RECEIVE A TOTAL OF ELEVEN (11) PAGES.

Dated: October 1, 2003.

Donna J. Raaymakers
Donna J. Raaymakers
Van Dyke, Gardner, Linn
& Burkhardt, LLP
2851 Charlevoix Drive, S.E., Suite 207
Post Office Box 888695
Grand Rapids, Michigan 49588-8695
616/975-5500

FSB:djr
TOP01 P-100

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application Serial No. : 10/064,416
 Applicants : Thomas G. Topolski
 Filing Date : July 11, 2002
 Art Unit : 3712
 Examiner : Kurt Fernstrom
 For : SWIM STROKE TRAINER
 Attorney Docket No. : TOP01 P-100
 Customer No. : 28101

Confirmation No.: 9321

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below:

CLAIMS AS AMENDED

	Col. 1		Col. 2	Col. 3	Small Entity		Other Than a Small Entity	
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	Rate	Add'l Fee
Total Claims	* 27	Minus	** 32	= 0	x \$ 9	\$ 0	x \$ 18	\$ -
Independent Claims	* 2	Minus	*** 4	= 0	x \$43	\$ 0	x \$ 86	\$ -
First Presentation of Multiple Dependent Claims \$145						\$ 0	x \$290	\$ -
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$ 0		\$ -

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3
- ** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- *** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

- ☒ Small entity status of this application 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted or is enclosed.
- ☒ No additional fee is required.
- ☐ A check in the amount of \$_____ is attached.
- ☒ Please charge any additional fees that may be required to Deposit Account No. 22-0190.

VAN DYKE, GARDNER, LINN & BURKHART, LLP

Dated: October 1, 2003.

By:

Frederick S. Burkhardt

Registration No. 29 288

P.O. Box 888695

Grand Rapids, Michigan 49588-8695

(616) 975-5500

FSB:djr
 TOP01 P-100

VIA FACSIMILE NO.: (703) 305-7687

PATENT
TOP01 P-100

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application Serial No. : 10/064,416
Applicants : Thomas G. Topolski
Filing Date : July 11, 2002
Art Unit : 3712
Examiner : Kurt Fernstrom
For : SWIM STROKE TRAINER
Attorney Docket No. : TOP01 P-100
Customer No. : 28101

Confirmation No.: 9321

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

RESPONSE

This is in response to the Office Action mailed July 11, 2003.

Amendments to the claims are reflected in a listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 6 of this paper.

Amolt

#5/A

10/3/03

B Ross